

## **NH EMS MEDICAL CONTROL BOARD**

**Lakes Region Fire Mutual Aid  
62 Communications Drive  
Laconia, NH**

### **MINUTES OF MEETING SEPTEMBER 19, 2002**

**Members Present:** Donavon Albertson, MD; Frank Hubbell, DO; Jeffrey Johnson, MD; Patrick Lanzetta, MD; James Martin, MD; Joseph Mastromarino, MD; Douglas McVicar, MD; Suzanne Prentiss, Joseph Sabato, MD; , John Sutton, MD; Norman Yanofsky, MD

**Members Absent:** Joseph Cravero, MD; Chris Fore, MD; William Siegart, DO

**Guests:** Jon Bouffard, Donna Clark, Jeanne Erickson, Steve Erickson, Janet Houston, Ed Lavery, Steve L'Heureux, Doug Martin, Clay Odell, George Patterson, Mary Valvano, MD; Gary Zirpolo

**Bureau Staff:** Kathy Doolan-Field Services Coordinator, William Wood-Preparedness Coordinator

#### **I. CALL TO ORDER**

**Item 1.** The meeting of the NH EMS Medical Control Board was called to order by Dr. McVicar at 9:07 AM at the Lakes Region Fire Mutual Aid (LRFMA) Communications Center in Laconia, NH.

#### **II. INTRODUCTION OF NEW MEMBERS**

**Item 1. Guests Introduced.** No new members were introduced. All attendees introduced themselves. An overview of the LRFMA and NH Bureau of Emergency Communications Center was given by B. Wood.

#### **III. ACCEPTANCE OF MINUTES**

**Item 1. July 18, 2002 Minutes.** J. Houston advised she had not attended the meeting.

Page 3, Item 5 "Legislative Items" change "would appear to nurses" to read "would appear to allow nurses".

**Motion** by Dr. Hubbell, second by Dr. Martin, to approve the minutes as amended. Motion passed unanimously.

#### IV. DISCUSSION & ACTION PROJECTS

##### Item 1. Protocols

The Rapid Sequence Intubation (RSI) protocol recommended by Dr. Johnson was reviewed. **Motion** by Dr. Hubbell, second by Dr. Martin, to delete from Section 1 "Contraindicated in patients with CNS insult with suspected increased ICP (i.e. traumatic head injury, CVA, bleed)." and insert it in Rapid Sequence Intubation (RSA) 5.4 Protocol. Motion passed and the Etomidate protocol was approved unanimously.

Consideration of Dr. Yanofsky's sample protocols request that Glucagon be added to the Bradycardia and Asystole protocols was discussed. Recommendation also to include an addition into the Poisoning 2.5 Protocol. **Motion** by Dr. McVicar, second by Dr. Yanofsky, to add the medication as discussed to the Asystole 3.1, Bradycardia 3.2 and Poisoning 2.15 Protocols. Motion passed unanimously.

Dr. Albertson expressed his appreciation for the on-going system support in updating the Protocols.

Dr. Albertson presented a list of suggested additions, changes, corrections and and/or deletions for the next edition of the *Local Option* Protocols.

Dr. Albertson's list was discussed and the following changes were made:

- \***Vasopressin:** remove the line: "PEA, Protocol 3.7 and Asystole, Protocol 3.1, Medical Control, 'Vasopressin may be considered.'"
- \***Rocuronium:** reference to Rocuronium be removed.
- \***Hypothermia:** The instruction "Begin CPR if pulseless" is removed.
- \***Asystole:** Change the line "ETT Intubation or EOA as trained." to "ETT Intubation or Combitube or EOA as trained".
- \***Nausea/Vomiting:** Change the line "Prochlorperazine 2.5 mg IV or 5 mg IM once" to "to Prochlorperazine 2.5 mg IV or 5 mg IM; repeat once in 10 min. prn".
- Change the line "Promethazine 6.25 mg IV or 12.5 mg IM once" to "Promethazine 6.25 mg IV or 12.5 mg IM"; repeat once in 10 min prn".

Dr. Albertson proposed that Rocuronium be considered under the RSI Protocol. He noted the need for further study on appropriate post-RSI intubation management.

Dr. Lanzetta suggested that Rocuronium be considered for the Interfacility Protocol.

The Board decided to defer further discussion on the use of Rocuronium.

**Motion** by Dr. McVicar to accept Dr. Albertson's Protocols memo with the above changes. Motion passed unanimously.

**Motion** by Dr. Sabato, second by Dr. Yanofsky, to accept the use of Amiodarone. Discussion included the use of Amiodarone in refractory VF, as well as other antiarrhythmic uses which have become part of the ACLS standards. Motion passed with 1 abstention.

Dr. Martin recommended that the use of Amiodarone be tracked by the Bureau of EMS.

Dr. Hubbell advised that he would provide a brief "All Hazards" summary for the next edition of the *Local Option* Protocols.

**Item 2. Advanced Spinal Assessment.** **Motion** by Dr. McVicar to modify "Suspected Spinal Cord Injury 4.8" Protocol to reflect the approved use of the "Advanced Spinal Assessment Protocol" as suggested by Frisbie Hospital EMS. Second by Dr. Sabato. Board discussion included consideration of whether to use the mechanism of injury as a necessary part of the protocol. Dr. Hubbell and D. Martin will finalize the protocol revision and include a summary heading on mechanism of injury considerations. Motion passed unanimously.

**Item 3. Esophageal Obturator Airway & Pneumatic AntiShock Garment (PASG) Devices.** These modalities (especially PASG) are rarely used in NH today. Medical research does not support their usefulness. Dr. Sabato noted that some local fire department pay scales may include these skills levels. No action taken on these topics.

## V. INCUBATING PROJECTS & SUBCOMMITTEE REPORTS

**Item 1. "Fast 1" Sternal Interosseus Infusion Device.** The proposal for use of this device in New Hampshire was tabled to the November Board meeting when the team initiating this proposal can be present.

**Item 2. Bureau of EMS Report.** Chief Prentiss provided updates on the following items:

- \*appreciation expressed for the efforts of staff during the reorganization process
- \*Liza Burrill is the new Education Coordinator located in the Northern NH EMS Office in Berlin
- \*Kathy Doolan is the new Field Services Coordinator located in the Upper Valley EMS Office in Claremont
- \*Bill Wood is the new Preparedness Coordinator located in the Bureau office
- \*David Dow is the new Field Service Representative located in the Southern NH EMS Office in Wilton
- \*Lenny Deane is the new Field Services Representative located in the Bureau office
- \*Tammy Fortier continues as the Field Services Licensing Coordinator in the Bureau office

- \*Karen Louis is the new Education Specialist located in the Seacoast EMS Office in Epping
- \*2 vacant Education Specialist positions have been posted. In-house applications have been received applicants
- \*Fred von Recklinghausen is the new Research Coordinator located in the Bureau office
- \*Michelle Baker is the Statistician located in the Bureau office
- \*The ALS Coordinator vacancy posting has received 8 applications, 4 applicants interviewed, 2 final interviews in process. This position will serve as liaison to the Medical Control Board
- \*Final EMS Licensing Rules have been distributed to all EMS Units
- \*EMT Instructor/Coordinator school (15 candidates) held in the Littleton area is finishing. 2 more I/C Schools will be scheduled for the central and seacoast NH areas
- \*Federal HIPAA rules finalized in August. Attorney Doug Wolfberg will be in NH to do a "HIPAA: Now That The Regulations are Final" seminar on 11/6/02. The session will be held in Meredith. This session is co-sponsored by the NH Ambulance Association, the NH Association of EMT's and two other co-sponsors are being considered
- \*Second annual NH Trauma System stakeholders' conference will be held 11/6/02 at the Inn at Mills Falls in Meredith. Theme will include the role of a trauma system in disaster management
- \*The next meeting of the NH Trauma Medical Review Committee will be 10/2/02 at the NH Fire Academy in Concord
- \*Work will continue with the TMRC on the trauma grant
- \*EMS system awards will be presented at the 10/19/02 North Country EMS Conference banquet
- \*The Bureau is utilizing 2 new portable display boards
- \*Updated Bureau reorganization and work responsibility charts being distributed

Dr. McVicar expressed the appreciation of the Board for Bill Wood's longtime efforts as the Bureau's liaison to the Medical Control Board. The Board responded with a warm ovation.

**Item 3. ACEP Report.** Dr. Sabato reported on the following items:

- \*The upcoming NH Public Health Association conference will include an overview of the NH EMS system.
- \*The cooperative public health/EMS/public safety initiative has been named the "Intersections Collaborative"
- \*Cooperative effort continues with the NH Dept. of Health & Human Services on implementation of its CDC-HRSA health systems grant.
- \*Federal grants applications submitted for funding a cadre of Medical Reserve Officers and for training/retention of volunteers.

**Item 4. DHART/9-1-1 Project.** S. L'Heureux advised that the NH Bureau of Emergency Communications (9-1-1) reviewed motor vehicle accidents reported through the 9-1-1 system for August 2002. This information was requested as a background for a discussion of region-wide aeromedical resources and other factors in the operation of the NH trauma system.

"Major incident" (plane, bus, crane, watercraft, ATV's, auto/motorcycle) . . . 1  
 High mechanism injury accidents (70% were "Delta" level calls) . . . . . 119  
 Accidents involving hazardous materials, entrapment, patient not alert . . . 33

IN all, study criteria were met for approximately 5-6 calls per day.

D. Clark, Dartmouth-Hitchcock Air Response Team (DHART), noted that the Concord 9-1-1 Public Safety Answering Point (PSAP) is being advised of DHART's availability during the hours of 7 AM - 7 PM.

She also advised that Monadnock Community Hospital in Peterborough is interested in conducting a research project on medical helicopter resource notification.

Discussion on the above included the concept of DHART being advised to consider "standby status" based on preliminary reports of a motor vehicle accident involving the above factors.

**Motion** by Dr. Yanofsky, second by Dr. McVicar, for the NH EMS Medical Control Board to endorse the proposed research project between DHART, the NH Bureau of Emergency Communications and Monadnock Community Hospital, for the purpose of developing further background information pertinent to this discussion. The motion passed unanimously.

**Item 5. Due Process Project.** Chief Prentiss reported that 3 productive meetings have been held with the Professional Firefighters of NH (PFFNH). A future meeting will include additional groups with a major interest in this topic such as the EMS Medical Control Board, EMS Coordinating Board, NH Association of Fire Chiefs, NH Hospital Association, Hospital EMS Coordinators, etc. to assist in developing a statewide procedure for incident reviews and disciplinary procedures. Project completion timetable for 2003.

**Item 6. Hospital Diversion Project.** Dr. Albertson commented that the Seacoast EMS Regional Council has coordinated a signed hospital diversion agreement between the 4 hospitals. The NH Bureau of Emergency Communications (9-1-1) is assisting in the implementation of this project.

**Item 7. Interfacility Transfers Project.** No discussion.

**Item 8. Paramedic Programs Education Quality Assurance.** Project members have received related information from Liza Burrill, the Bureau's Educational Coordinator.

Anecdotal information was presented suggesting that personnel at some preceptor sites have concerns about the quality of paramedic students being received.

Representatives from the various NH paramedic programs will be invited to participate in future committee meetings.

**Item 9. Public Health & EMS.** Dr. Sabato advised that Public Health, EMS and Highway Safety groups working together have created an "Intersections Collaborative" which will be featured at the fall forum of the NH Public Health Association.

**Item 10. Trauma Medical Review Committee Report.** Dr. Sutton noted that NH is experiencing the effects of neurosurgical staffing which is also felt nationally. The Committee is discussing how to address this coverage issue within the existing system.

**Item 11. SB 400 Poison Control Center (PCC)Funding.** Dr. Yanofsky advised the Board of the legislative effort to fund efforts in New Hampshire.

- \*currently a national "800" phone line is available
- \*PCC's utilizing the "800" phone number must be certified
- \*interest in upgrading the current level of service and increased funding needed
- \*Legislative Study Committee currently reviewing funding options
- \*consideration for a "Request for Proposal (RFP)" to provide PCC services
- \*potential income via a phone surcharge to fund 60-70% of the PCC services
- \*committee has met with the NH Enhanced 9-1-1 Commission to consider potential funding use of the 9-1-1 surcharge
- \*NH Department of Health & Human Services is the lead agency for coordinating PCC efforts

## **VI. PUBLIC COMMENTS**

Chief Prentiss noted the following items:

- \*Assistant Safety Commissioner John Stephen has returned to his fulltime duties
- \*The North Country EMS Conference will be held in Bartlett, NH October 17 - 20, 2002 with a Friday evening, October 18<sup>th</sup> EMS roundtable session being held to discuss EMS-related issues.

## **VII. ADJOURNMENT**

**Motion** by Dr. Sutton, second by Dr. Mastromarino, to adjourn the meeting at 12:17 PM. Motion passed unanimously.

**VIII. NEXT MEETING**

Thursday, November 21, 2002 at 9:00 AM at the NH Fire Academy 222 Sheep  
Davis Road (Rte. 106-South) in Concord, NH

Respectfully submitted,

Suzanne M. Prentiss, Executive Secretary

(Prepared by: William H. Wood, Preparedness Coordinator)

